# Quality Management: A Partnership between: Cumberland LME and CFAC



- State CFAC Leadership Conference:
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February 2008



### What is Quality Management?

- Quality management is the framework for assessing and improving services and supports, operations and financial performance.
- Two key components are Quality Improvement and Quality Assurance.
  - QI-Outcome Driven
  - QA- Compliance Driven

## **Key ingredients for a Successful Quality Management System**

#### Collaboration:

- To work jointly with others
- The interaction among two or more individuals that can encompass a variety of actions, such as communication, information sharing, coordination, cooperation, problem solving, and negotiation.

#### Partnership:

 A relationship between individuals or groups that is characterized by mutual cooperation and responsibility, as for the achievement of a specified goal.

### What else do you need?

- Goals and Objectives
- Information
- Discussion
- Analysis
- Agreed upon outcomes

#### **Desired Outcomes:**

- Qualified competent provider community that includes:
  - Staff who are knowledgeable about the persons and families being served
  - Person Centeredness
  - A Focus on consumer outcomes
  - Excellent compliance to standards, service definitions, MOA/state contract
  - Attention to consumer rights

#### **Desired Outcomes continued...**

#### • An LME that :

- Successfully performs all LME roles and functions as defined by the Division of MH/DD/SAS and the General Assembly
- Monitors providers and services in the community
- Works with others to develop and implement the strategic plan
- Ensures providers are available, accessible and competent to meet consumer, family and community
- Shares data & collaborates with other partners

#### **Desired Outcomes continued...**

#### A Consumer Family Advisory Committee that :

- Represents all disability groups
- Actively participates in gap and needs analysis with the LME
- Provides feedback on how the LME, providers and other community partners are doing
- Participates in management and analysis of data
- Advocates for consumers, family members and the community

### Some ways we are doing this:

- Strategic Plan Development and Review
- Local Business Plan
- Critical incident review and analysis
- Complaint review and analysis
- Provider training-analysis from the consumer perspective
- Quarterly gaps and needs assessments
- Quality Council

#### Incident Report Analysis from CFAC Perspective- 2<sup>nd</sup> quarter (Oct – Dec 2007)

Incident Type	2 <sup>nd</sup> Quarter (2007)	1 <sup>st</sup> Quarter (2007)
Injury	46	44
Abuse Allegation	30	28
<b>Medication Error</b>	3	20
<b>Behavior Legal</b>	58	60
<b>Behavior Other</b>	21	17

## **Incident Analysis continued**

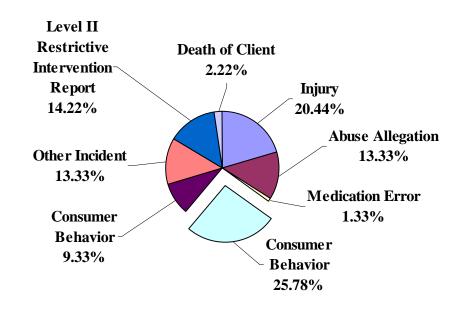
Incident Type	2 <sup>nd</sup> Quarter (2007)	1 <sup>st</sup> Quarter (2007)
Other Level II	32	41
Consumer Death	5	5
In County	225	242
Out of County	68	90
In County versus Out of County	30.22%	37.19%

### **Analysis of Table 1**

- As Table 1 shows, some of the incidents increased and others decreased, however, there was an overall decrease of In County Incidents with 225 Incidents for the second quarter vs. 242 for the first quarter. The Out of County Incidents percentage also decreased with 30.22% vs. 37.19% for the same time frame.
- These results may indicate an increase of incident prevention measures and an increased degree of care exercised for the benefit of the consumers.

### **Further Analysis**

## **Cumberland County's Second Quarter Incident Report**

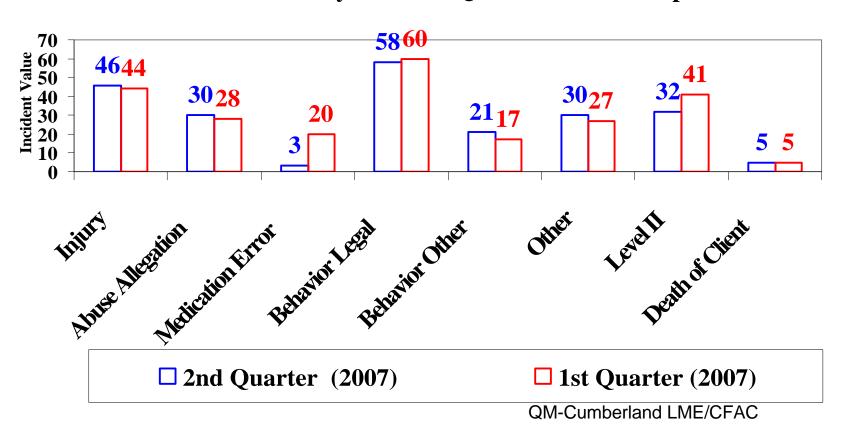


#### Pie Charts for Incident Analysis

 The Pie Chart breaks down the components of the incident report and shows that consumer behavior amounted for the highest percentage of incidents and Medication Error had the lowest incident percentage.

### Another way to look at the data...

#### **Cumberland County's Second Quarter Incident Report**



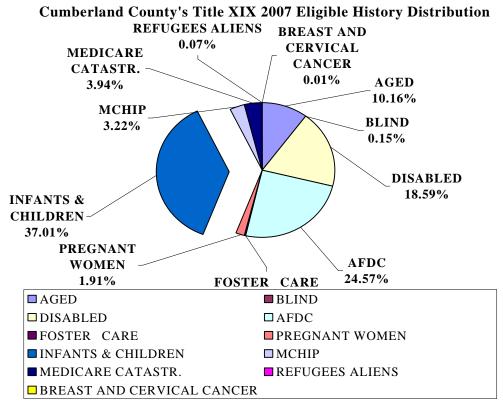
## Partnership with the Local Business Planning Process

• The CFAC and LME work towards assessing and identifying any gaps and needs that our community has with the objective of continuously improving the LME's level of service and efficiency by using and combining Best Practices methods with a person-centered approach so a consumer may reintegrate to the community.

### LBP partnership continued

• Strengths and Opportunities for the CFAC are in participating as close as possible with the LME and other organizations such as NAMI, CONTACT, private and public providers, and other stakeholders like the welcomed involvement with UNCP nursing, psychology, and psychiatry students whose exchange of input/output can benefit all the involved parties including both the LME and the Cumberland County CFAC itself.

## FAC and the Quality Council: CFAC analyzes Medicaid data monthly:



## OUTREACH WITH THE COMMUNITY, WITH THE LME, CFAC PROJECTS

- Disability Advocacy Council meetings –Outreach
- The CFAC has been very active with the community by attending and participating with the Disability Advocacy Council who meet monthly at the Kiwanis Center. Agenda topics have ranged from local transportation issues to access in new and existing residential constructions. It was noted that the access to designated disability parking spaces poses the most challenge since unauthorized vehicles may use them. This concern is shared with the LME as part of the gaps and needs assessment.

## **CFAC and LME Provider Quarterly Quality Management Training**

• The CFAC Co-Chair attends quarterly Quality Management trainings representing CFAC and other consumer/family members. An analysis of information is completed, from the consumer perspective, i.e. impact if provider does not complete authorizations correctly, poor coordination of services, failure to appropriately document services, provider not following Person Centered planning and Person Centered thinking philosophy.

## **CFAC and LME Provider Quarterly Quality Management Training**

- The analysis of key issues is shared with providers, who are encouraged to share the concerns with their individual consumers as well as to monitor possible negative impacts on services if guidelines are not followed.
- Changes from each quarter are discussed with recommendations being made to the LME for inclusion in future trainings.

#### Other outreach and projects

- CFAC members attend the annual legislative breakfast and have opportunities to discuss with state legislators and county commissioners the state of mental health reform in Cumberland County.
- CFAC and the LME have worked with an advertising company to secure three billboards throughout the community advertising access to services through our "Hope" line.

# Keys to Ongoing Success for CFAC, Providers and the LME During Transformation:

- Know your role (dangers and strengths)
- Know your partners' roles
- Know the data needed to manage, collect and share
- Support the system by fulfilling your role around shared outcomes

## The real key is to be involved and share: Thank you!!

- Alejandro Vazquez- co-chair
- Debbie Jenkins-Quality Management-LME
   On behalf of:
- Cumberland County CFAC
- Cumberland County LME
- Cumberland County Provider Community
- All of our consumers, family members, other key stakeholders